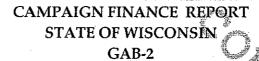
Campaign Finance Report Short Form EB-2a State Elections Board			F/ -	3031 - 123456 VAD AUTO UNDER
Spring Fall Special Pre-Primary	Continuin	g Report due Jan. 31,		ount Temmes
Spring Fall Special Pre-Election	Continuin	g Report due July 20, <i>36</i>	坐 (25	man in T
Buckle for County Name of Candidate or Committee (in full)	Board		/4	
Name of Candidate or Committee (in full)	1		1/65	SYSOSEIBITIBIC
3266 West Boxt Rd				15050F8FT73
Address (number and street) 6 see By WE 543	<i>i</i> 5			
City, State, Zip	<i>, , ,</i>			
certify that the above named committee or candidate nake disbursements, or incur obligations during the palance remains the same as previously reported. The 1.06(9), Stats.	eriod covered by	this report and that the cas	sh	
Signature of committee Treasure or Canadate	Date	Daytime Phone	,	
Tafer & Theles	7-21-14	920 497-	3050	
B-2a (Rev. 9/95) (Reformatted 3/98) (YCK-9/99)	, ,			

SHORT FORM – Use For "No Activity" Reporting Period



COMMITTEE IDENTIFICATION

Filing Period Name:	July Continuing 2014
	Covers all activity from 01/01/2014 through 06/30/2014
Name of Committee/Corporation:	Friends of Corrie Campbell
Street Address:	931 Watermolen Ave
	· · · · · · · · · · · · · · · · · · ·

Green Bay, WI 54304

GAB ID: 0105552

	The second secon
Column A This Period	Column B Calendar Year-To-Date
\$1,225.00	\$1,225,00
\$500.00	\$500.00
\$0.00	\$0.00
\$1,725.00	\$1,725.00
· · · · · · · · · · · · · · · · · · ·	
\$1,629.36	\$1,629.36
\$0.00	\$0.00
\$1,629.36	\$1,629.36
	\$1,225.00 \$600.00 \$0.00 \$1,725.00 \$1,629.36 \$0.00

CASH SUMMARY

City, State and Zip:

Cash Balance Beginning of Report*	\$0.00	· ·
Total Receipts	\$1,725.00	
Subtotal	\$1,725.00	
Total Disbursements	\$1,629.36	
CASH BALANCE END OF REPORT*	\$95.64	· · · · · · · · · · · · · · · · · · ·
INCURRED OBLIGATIONS		
(Balance at the Close of This Period-3A)	\$0.00	· · · · · · · · · · · · · · · · · · ·
LOANS (Balance at the Close of This Period-3B)	\$0.00	· · · · · · · · · · · · · · · · · · ·

^{*}Cash Balance as reported by committee

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Candidate or Treasurer:	Signature of Candidate or Treasurer	Date:	Daytime Phone:
Anderson, Jon D	Corrie Campbell/ca	Email:	jon@gblawyer.com

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2 (Rev. 12/03) This form is prescribed by the Government Accountability Board, P.O. Box 7984, Madison, WI 53707-7984, 608-266-8005.

SCHEDULE 1-A

RECEIPTS Contributions From Individuals

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Occupatio	מי	Employer Name	Employer Address	Amount	YTD'
Monetary	The second secon	**************************************						
04/16/2014	Anderson, Jon D	3580 Glen Oaks Pass, Green Bay, WI 54311	Attorney	٠			\$50.00	\$50.00
04/16/2014	Garner, Wesley	3480 Counrty Winds Ct, Green Bay, WI 54311	Owner		Great Lakes Calcium Chemical	1450 Byslby Ave, Green Bay, WI 54303	\$500.00	\$500.00
04/28/2014	Ancous, Janet	1403 Shirley St, Green Bay, WI 54303	Attorney				\$100.00	\$100.00
05/12/2014	Garner, Fred	N Shore Acres Dr, New Franklin, WI 54229	Retired				\$100.00	\$100.00
06/27/2014	Tochterman, Robert	950 Watermelon Ave, Green Bay, WI 54304	Retired				\$100.00	\$100.00
						Sub Total	\$850.00	
n-Kind					11222			
06/30/2014	Jahnke, Robert	239 Libal St, De Pere, WI 54115	Owner		TopHat Marketing	239 Libal St, DePere, WI 54115	\$375.00	\$375.00
3	Comment(s): Fliers			1	<u></u> ,,,			
						Sub-Total	\$375.00	
3 8 5 6				Ţ	otal Unitemize	d Contributions	\$0.00	
		The state of the second		Tot	al Anonymou	s Contributions	\$0,00	
1545						Grand Total	\$1,225.00	
			Mark Files		No.	on-Monetary (=):	\$0.00	
		and design contra	a design (1991)		Lo	an Forgiven (-):	\$0.00	
					August Francis	Total	\$1,225.00	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Complete Committee Name: Friends of Corrie Campbell

	Full Name	Address	Amount	YTD
In-Kind				-
06/27/2014	Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703	\$500.00	\$500.00
	Comment(s): Voter List	1		
		Sub Total	\$500.00	
		Grand Total	\$500.00	
		Non-Monetary (-):	\$0.00	
		Total	\$500.00	

SCHEDULE 1-C

RECEIPTS Other Income and Commercial Loans

Complète Committee Name:

Friends of Corrie Campbell

		Service and the service of the service of
Date Full-Name	Address Am	ount S YTO - I
WC334 Control		
	oral	\$0.00
		·

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Complete Committee Name: Friends of Corrie Campbell

Date	Full Name	Address	Vendor Name	Vendor-	Expense Purpose	An	ount
In-Kind							
06/27/2014	Republican Party of Wisconsin	148 East Johnson Street, Madison, WI 53703			Mailing List		\$500.0
	Comment(s): Voter Li	st .					
06/30/2014	Jahnke, Robert	239 Libal St, De Pere, WI 54115			Printing - Brochures		\$375.0
	Comment(s): Flier Dis	tribbuted Campaig	n		· · · · · · · · · · · · · · · · · · ·		
	. The same street in adjustic which				Süb:Total		\$875.00
Monetary							
05/01/2014	Heyerman Printing	2083 Holmgren Ave, Green Bay, WI 54304			Printing - Brochures		\$110.78
	Comment(s): Posters/F	Fliers Campaign	· · · · · · · · · · · · · · · · · · ·	J			
05/05/2014	Fast Signs	2815 S Oneida St, Green Bay, WI 54304			Printing Misc. (buttons, bumper stickers, t- shirts)		\$78.15
	Comment(s): Car Magr	ets Campaign		·			•
05/07/2014	Fed Ex Office	2279 S Oneida St, Green Bay, WI 54304			Printing - Brochures		\$105.50
	Comment(s): Fliers for	campaign					
5/13/2014	Government Accountability Board	212 East Washington Avenue, 3rd Floor, P.O. Box 7984,			Mailing List		\$70.00
		Madison, WI 53707-7984					•
	Comment(s): Voter Data	List					
6/24/2014	Office Depot	1535 W Mason St, Green Bay, WI 54303			Office Supplies		\$90.68
14 11 11 11 11	Comment(s): Envelopes	, ink for campaign	fliers and donor let	ters			

Monetary							<u> </u>
06/24/2014	New Documents and Labels Inc	2688 Hillside Heights Dr, Green Bay, WI 54311				Printing Misc. (buttons, bumper stickers, t- shirts)	\$231.05
	Comment(s): Postcards	-campaign	I	·			
06/27/2014	US Postal Service	300 Packedand Dr, Green Bay, WI 54303	\			Postage	\$49.00
A Million Co.	Comment(s): Postage st	amps for postca	ard mailings				
ar in the same		relations is the				Sub Total	\$735.16
Unitemized	-		-		:		
06/30/2014	Unitemized	WI				Unitemized	\$19.20
	Comment(s): Unitemized	l expenditure		· .			
						Sub Total	\$19.20
						Grand Total	\$1,629.36
					Nor	i-Monetary (+):	\$0.00
						Total	\$1,629.36

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

Complete Committee Name:

Friends of Corrie Campbell

	,	
Amount	Name Address Vendor Name Vendor Address	Date Full Name
\$0.00	Grand Total	
\$0.00	Non-Monetary (-):	
\$0.00	Registrant In-Kind Sub-Total (-):	en de la completación de la comp
\$0.00	Total	

SCHEDULE 3-A

ADDITIONAL DISCLOSURE

Incurred Obligations Excluding Loans

Complete Committee Name:

Friends of Corrie Campbell

Beginning Incurred Obligation Amount:

\$0.00

and the second s	
Amount .	Full Name
	Date Full Marie Address
Committee of the commit	
8	
80.00 S	Grand Total
\$ T	
The state of the s	
Amount Daid	CALL No.
Millount calu	Date F Pull Name

Date Füll Name	Amount Paid
Grand To	tal \$0.00
Outstanding Incurred Obligations End of Rep	ort \$0.00

SCHEDULE 3-B

ADDITIONAL DISCLOSURE

Loans

Individual, Committee or Commercial

Complete Committee Name:

Friends of Corrie Campbell

Beginning Loan Balance:

\$0.00

Date Full Name Address	Amount *
	Grand Total \$0.00

Date Full Name	. Amount Paid
Grand Fotal	\$0.00
Outstanding Loans End of Report	\$0.00

	18 M
Campaign Finance Report Short Form EB-2a State Elections Board	Sound Company of Services of Sound Company of Services of Sound Company of Services of Ser
Spring Fall Special Pre-Primary Continuing Report due Jan. 31, Spring Fall Special Pre-Election Continuing Report due July 20, //	Bounda Comply Const
Name of Candidate or Committee (in full) Sandy Duckett Address (number and street) 2552 Wilder Ct.	123456
City, State, Zip Green Bay, WI 54311	
I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash balance remains the same as previously reported. This report fulfills filing requirements under Sec. 11.06(9), Stats.	
Signature of Committee Treasurer or Candidate Date Daytime Phone Daytime	693
EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)	

SHORT FORM – Use For "No Activity" Reporting Period

Campaign Finance Report Short Form EB-2a State Elections Board			2010112
Spring Fall Special Pre-Primary		Report due Jan. 31, Report due July 20, 2014	1
Essentem for a Bell Name of Candidate or Committee (in full) 843 Downson St. / God Address (number and street) Green Bry, WI 54303 City, State, Zip	en Bry	4	
I certify that the above named committee or candidate make disbursements, or incur obligations during the p balance remains the same as previously reported. The 11.06(9), Stats.	eriod covered by I	his report and that the cash	
Signature of Committee Treasurer or Candidate	Date	Daytime Phone	٠.
FB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)	7/21/14	(120) 430-8331	Ē-

JUL 2014

SHORT FORM – Use For "No Activity" Reporting Period

Campaign Finance Report Short Form EB-2a State Elections Board		
Spring Fall Special Pre-Primary Spring Fall Special Pre-Election	Z Continuing	g Report due Jan. 31, g Report due July 20, <u>2014</u>
Name of Candidate or Committee (in full) Face 328 Dourd Driver Address (number and street) Address (Surg, 181 54303 - 3 City, State, Zip	•	nett Bours
certify that the above named committee or candidated ake disbursements, or incur obligations during the alance remains the same as previously reported. T 1.06(9), Stats.	period covered by	this report and that the cash
Signature of Committee Treasurer or Candidate Pay J. Diffett, mo Freesance	Date 7-16-14	Daytime Phone 9 20 - 1/94- 226 5
B-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)		

SHORT FORM – Use For "No Activity" Reporting Period

-	Campaign Finance Report Short Form EB-2a State Elections Board							·
	Spring Fall Special Pre-Primary		Continuing	Report due	Jan. 31,			
	Spring Fall Special Pre-Election		Continuing	Report due	July 20, 🙆	<u>1014</u>	•	
, N							705S	age
A	ddress (number and street) 2430 E	K	idge	e Te	rrac	C		
C	ty, State, Zip Green	P	au,	WI	54.	<u> 31</u> 1		
mal bala	rtify that the above named committee or candidate to disbursements, or incur obligations during the punce remains the same as previously reported. This D6(9)/Stats.	did not	receive con	ntributions on	nd that the o	cash		
	Activitie of Committee Treasurer or Candidate	Date <i>07</i>	109/14	Daytime P 9 20 -	hone 465-	<i>035</i>	9	
EB	M(Rev. 9/95) (Reformatted 3/98) (YAK 9/99)	/	,		• •			
		٠.				(32)	32A2526	272020303
				•		25		33) 33
		-		. ·		7178119	<i>(</i> 42,00	<u>ا</u> د
			es.			OF STATE	E121110	1681957

SHORT FORM – Use For "No Activity" Reporting Period

	GN FINANCE REPO IMITTEES OF WISC	ORT CONSIN	RECEIVED JUL 2014 Sandra L. Juno Brown County Clerk
Is This Report an Amendment: Yes	□ No		
Instructions for completing schedules are on the b	ack of each schedule.	415	RECEIVED
COMMITTEE IDENTIFICATION		<u> </u>	JUL 2014]
Name of Committee Friends of Stanson Street Address	Consogusta		Sandra L. Juno Brown County Clerk FEICE USE ONLY
2700 Humboldt Rd Apt. City, State and Zip Code	4		RICE USE ONLY
City, State and Zip Code	•		
Please check if address is different than previously reported,	, ,	Registration Statement in	the back of this form.
NAME OF REPORT	•		
January Continuing Pre-Primary	Spring	I Special	
July Continuing 2014 Pre-Election	Spring Fal	II Special	Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND			
DISBURSEMENTS	Column A This Period	Column B Calendar	
1. RECEIPTS		Year-To-Date	
1A, Contributions (Including Loans) from Individuals	s 280.00	\$ 410.00	
1B. Contributions from Committees (Transfers-In)	\$	\$	<u>]</u> .
1C. Other Income and Commercial Loans	\$	\$	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 250.00	\$ 410.00	
2. DISBURSEMENTS]
2A. Gross Expenditures	\$ 110. LZ	\$ 115.34	
2B. Contributions to Committees (Transfers-Out)	\$	\$	•
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 110.13	\$ 115, 24	
CASH SUMMARY			
Cash Balance Beginning of Report	\$ 634 ³³		
Total Receipts	\$ 280.00	•	
Subtotai	\$ 914.33		
Total Disbursements	\$ 110.17		• •
CASH BALANCE END OF REPORT	\$ 804.16		•
INCURRED OBLIGATIONS			
(Balance at the Close of This Period-3A)	\$		
LOANS (Balance at the Close of This Period-3B)	\$		•
I certify that I have examined this report and to the best of	f mv knowledge and belief :	it is true, correct and co	mplete.

Type or Print Name of Candidate or Treasurer	Signature of Candidate or Treasurer	Date:	•
lä a			e e e e e e e e e e e e e e e e e e e
Staish (Souspunding	March West As	ah .	970 211- 2793
Cionali Cinassinas	Summer I Hay	Daytime Phone	e: 720.216.3725

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09)

SCHEDULE 1-A

Complete Committee Name

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of _____

Staven Gruzzgueka Friends Instructions for completing schedules are on the back of each schedule Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Calendar Of Employment (if year-to-date total exceeds \$100) Year-to-Date Total long Oczus 03/31/14 \$150.00 150.00 Consider Barrenles, Every 2595 University Arc *12, Time I Dine LLC, 209 N. Green Bay was 54311 Washington of, bran Bay, WF 54301 Conduit Name: Check if: [In-Kind | Loan Conduit Occupation, Name and Address of Principal Place Calendar Date Full Name, Mailing Address and Zip Code Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Koony Lohde \$ 100. 04 102 114 Executive Director, BLUE, 2130 LOST Daymin RAON, Defere, WI 54115 1136 Ni Millay Ave; Green Bay wt 54303 Conquit Name: United Staff Union (USUDG#) Check if: In-Kind Loan Conduit
Full Name, Mailing Address and Zip Code Amount Calendar Occupation, Name and Address of Principal Place Date Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Dennis Hughes 1452 D. Humboldt heat, Milwanter, wr 53202. 04/10/19 \$10.00 40.00 Check if: In-Kind Loan Conduit Conduit Name: Calendar Date Occupation, Name and Address of Principal Place Amount Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Dennis Hughes 05/10/14 1652 W. Humboldt 442 A4 B10. milworker, WI 53 Zoz Check if: In-Kind Loan Conduit Conduit Name Full Name, Mailing Address and Zip Code Calendar Occupation, Name and Address of Principal Place Amount Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Dennis thoms 06,10,14 1652 N. Humbora+Ave#4, mijuantee, wz 53202 Conduit Name: Check if: In-Kind Loan Conduit Calendar Occupation, Name and Address of Principal Place Amount Date Full Name, Mailing Address and Zip Code Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Check if: In-Kind Loan Conduit Conduit Name Full Name, Mailing Address and Zip Code Calendar Date Occupation, Name and Address of Principal Place Amount Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) I. ICheck if: In-Kind Loan Conduit Conduit Name: Calendar Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Amount Date Year-to-Date Total Of Employment (if year-to-date total exceeds \$100) Check if: In-Kind Loan Conduit Conduit Name: SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE **TOTAL ITEMIZED CONTRIBUTIONS TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS** TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS

Pg. 2 of 4

DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Committee Name
Frends of Staush Gruszynskij

Instructions for completing schedules are on the back of each schedule. Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made

Democratic Parry of Brown County

18 S. Chestrus T Ø33. ≥ Member Printing -04101 114 Green Bay wt 54303 Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made 04104114 Feet For Service \$4,65 Pay Pal
22y Pal
3an Tose CA
Check if: In-Kind Offset 95731 Amount Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made Event Tickets. 04 123 114 8th CD Democratic Party 15 N. Pickney St. Swite 200 Madison Lot 53903 **₱37.5**0 convenision Check if: In-Kind Offset Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Of Person or Business to Whom Payment is Made Democratic Party of Boun Courty. 118 5. Chestrust 57. 04 123 114 Queux tickets " \$33. °° Spring Fling Check if: I In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Date Of Person or Business to Whom Payment is Made Feed for service 06 106 114 Pay Pal. 2211 y. Fist St. San Jose, CA 95131 Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Date Of Person or Business to Whom Payment is Made Fab for Service \$0.50 06 130 1 14 Pay Pal of 2311 No 513+ CA 95131 Check if: I In-Kind Offset Amount Date Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Of Person or Business to Whom Payment is Made 1 Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Amount Specific Purpose of Expenditure Date Of Person or Business to Whom Payment is Made Check if: In-Kind Offset Full Name, Mailing Address and Zip Code Specific Purpose of Expenditure Amount Date Of Person or Business to Whom Payment is Made 1 1 Check if: In-Kind Offset 110.17 SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE

TOTAL ITEMIZED EXPENDITURES \$

TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS

TOTAL EXPENDITURES \$

Pg. 3 of 4

TRANSMITTAL LETTER STATE OF WISCONSIN

WISCONSIN CAMPAIGN FINANCE INFORMATION SYSTEM

Transmittal Letter for Friends of Staush Gruszynski

Address Line1

2700 Humboldt

Address Line2

Apt #4

City, State and Zip

Green Bay, WI 54311

Attached is a check for a total amount of

\$100.00 for all the contributions

listed below.

Transmittal letter Generated: 04/02/2014

S.NO	DATE	CONTRIBUTOR NAME	ADDRESS	AMOUNT
1	03/28/2014	Rohde, Kathy	2130 Lost Dauphin Rd. 5N, De Pere, WI 54115	\$100.00
	Occupation:	Executive Director		
	Employer De	tails: BLUE, 1136 N. Military	Ave., Green Bay, WI 54303	
			TOTAL	\$100.00

Contact Address:

GAB ID:	0900059	
Conduit Name:	United Staff Union (USUDGP)	
Administrator Name:	Blank, James A	
Contact No:	(262) 375-4475	
Email Address:	blanjim@gmail.com	

End of Report

pg. 4 of 4

· · · · · · · · · · · · · · · · · · ·	GN FINANCE REP IMITTEES OF WIS	1	\S	CA CE GES BULLOWS
Is This Report an Amendment: Yes	☑ No		178	Selven 8
Instructions for completing schedules are on the b	ack of each schedule.		5167	2014
COMMITTEE IDENTIFICATION			12/2	JUL atal uno
Name of Committee	Harnburg		155	Salton Contras
Street Address Friends of Julie	Hormaig		OF	FORUSEONLY
2879 Hillcrest Ct.	<u></u>		•	
	54313			
Please check if address is different than previously reported,	and complete the Campaign	Registration State	ment in tl	ne back of this form. 🔲
NAME OF REPORT				
January Continuing Pre-Primary	Spring F	all Specia	1 .	
July Continuing Pre-Election	Spring F	all Special		Termination Report also complete Schedule 4
SUMMARY OF RECEIPTS AND	Column A	Column	В	
DISBURSEMENTS	This Period	Calenda	1	
1. RECEIPTS		Year-To-D	——i	
1A. Contributions (Including Loans) from Individuals	\$ 500000	\$ 500		
1B. Contributions from Committees (Transfers-In)	\$	\$		
1C. Other Income and Commercial Loans	\$	\$		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 500.50	\$ 500°	으	
2. DISBURSEMENTS				
2A. Gross Expenditures	\$ 43866	\$ 438	66	· •
2B. Contributions to Committees (Transfers-Out)	\$	\$		•
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 438.66	\$ 438	66	
CASH SUMMARY				·
Cash Balance Beginning of Report	\$ -0-		-	
Total Receipts	\$ 500°°	1		
Subtotal	\$ 500			•
Total Disbursements	\$ 438.66	1	•	
CASH BALANCE END OF REPORT	\$ 6 34			•
INCURRED OBLIGATIONS				
(Balance at the Close of This Period-3A)	s <u>-6</u> -			•
LOANS (Balance at the Close of This Period-3B)	s <u>-o-</u>] .		
I certify that I have examined this report and to the best of	f my knowledge and belie	f it is true, correct	and com	plete.
	ature of Candidate or Treasurer		Date: 7	-20-14
Julie Hornburg	Julia M.X	brobung 1)avtime Pho	one: 448-4168

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk. GAB-2L (Rev. 12/09)

SCHEDULE 1-A

Complete Committee Name

RECEIPTS Contributions (Including Loans) From Individuals

Page of		
	Page	 of

	:			
Instructions for	or completing schedules are on the back of e	! Occupation, Name and Address of Principal Place	Amount	Calendar
		Of Employment (if year-to-date total exceeds \$100)	1	Year-to-Date Total
3/8/14	Julie Hornburg 2879 Hillcrestct	Self	50000	500∞
	Green Bay Wi 543B			
		Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place		Calendar
, , ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
, ,		,		
			. [
	•			<i>r</i>
	Check if: In-Kind Loan Conduit	Conduit Name:	A TABLETON	Calendar
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
1 1				
			.	
		•		
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Total
1 1		Of Employment (if year-to-date total exceeds \$100)		(Cal-lo-Dais Ibia
,				
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
	Full Maille, Mailing Address and Elp 0000	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 / 1		• **		
		_		
	Check if: In-Kind Loan Conduit	Conduit Name:		Colordo
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
$I = I^{-1}$			•	
	-	•		
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Total
1. 1		Of Employment (if year-to-date total exceeds \$100)		100 (0 000)
		•		
		A		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
1 1	, an (earlier) When it is a second of the se	Of Employment (if year-to-date total exceeds \$100)	:	Year-to-Date Total
, ,				
	•			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		
•	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$	· · ·
		TOTAL ITEMIZED CONTRIBUTIONS	\$ 50000	
		m .	-0-	
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS		
	TOTAL CO	ITRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 500	
			fg. 2 0-	£ 3
			'7	

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Committee Name

Instructions fo	r completing schedules are on the back of each schedule.		•
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/10/14		Daniel Fusilmos	
	Walmart 2440 W. masonSt	Paper/Envelopes	2960
	Green Bay WI 54303		
Date	Check if: C In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		•
4/13/44	3585 lineville Rd	Postage Stanups	73.50
	Of Person or Business to Whom Payment is Made Shopko Express 2585 Lineville Rd Green Bay Wi Check if: 1 In-Kind Offset	Stances	15 =
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4/15/14	Perry Hornburg	Reimbursement	11406
	1 28-19 Hillcrest Ct	for printer ink	114.06
	Check if: 1 In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Susiness to Whom Payment is Made	Specific Purpose of Expenditure	Amount
6/30/14			
	305 E. Walnutst	Election	205∞
·	Check if: 1 In-Kind Offset Bay WI 54301	Report	200
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
4/3/14	Of Person or Business to Whom Payment is Made Fox Comm. Credit Union		50
1314	rox, comm, creait union	Checks	16.50
Date	Check if: C In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
1 1	Of Person or Business to Whom Payment is Made		
, ,			
Date	Check if: C In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made	Specific Fulpose of Experiorate	7,,,,,,,,,,
, ,			i ,
	·		
	Check if:		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1 1			
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
<i>I I</i>	State of the state	• •	
		•	
	Check if:		
٠.	SUBTOTAL ITE	MIZED EXPENDITURES THIS PAGE	\$
• •		TOTAL ITEMIZED EXPENDITURES	s 438.66
•			4
	TOTAL UNITEM	IZED EXPENDITURES \$20 OR LESS	\$
	a a shiring		11 (10
End	of Report	TOTAL EXPENDITURES	\$ 438.99
			0, 30+3
			79

1	GN FINANCE REPO IMITTEES OF WISO	ORT CONSIN	FRECENTED A SECOND	
Is This Report an Amendment:	X No	\$2	OF CENTER	
Instructions for completing schedules are on the b	- V	l (m	2017	
COMMITTEE IDENTIFICATION		\tag{7}.	Sundral Juno Sundral Juno Brown County Clerk	
Friends of Julie Jansch		1	Corporation of the second	
2574 Oakwood Drive)FF-C1946SHODEY	
City, State and Zip Code Green Bay, Wi 54304				
Please check if address is different than previously reported,	and complete the Campaign	Registration Statement in	ı the back of this form.	
NAME OF REPORT	· · · · · · · · · · · · · · · · · · ·			
January Continuing Pre-Primary	☐ Spring ☐ Fal	l Special		
July Continuing 2014 Pre-Election	Spring Fa	II Special	Termination Report also complete Schedule 4	
SUMMARY OF RECEIPTS AND	Column A	Column B		
DISBURSEMENTS	This Period	Calendar		
1. RECEIPTS		Year-To-Date		
IA. Contributions (Including Loans) from Individuals	\$100.00	\$2,485.00		
1B. Contributions from Committees (Transfers-In)	\$300.00	\$850.00		
1C. Other Income and Commercial Loans	\$	\$200.00	1	
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$400.00	\$3,535.00		
2. DISBURSEMENTS				
2A. Gross Expenditures	\$1,106.69	\$2,966.88		
2B. Contributions to Committees (Transfers-Out)	\$50.00	\$50.00		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$1,156.69	\$3,016.88		
CASH SUMMARY				
Cash Balance Beginning of Report	\$1,274.81			
Total Receipts	\$400.00			
Subtotal	\$1,674.81			
Total Disbursements	\$1,156.69			
CASH BALANCE END OF REPORT	\$518.12	· · · · · · · · · · · · · · · · · · ·		
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$			
LOANS (Balance at the Close of This Period-3B)	\$		•	

I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.

LOANS (Balance at the Close of This Period-3B)

Type or Print Name of Candidate or Treasurer Julie A. Jansch	Signature of Candidate or Treasurer Sully U. Jane C. Feriali) (Cu Sella) growy.	Date: 7-10-14 Cu_ Daytime Phone: 920-499-8808
	0 0 60/1	

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk. GAB-2L (Rev. 04/14)

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of ___

Friends of	f Julie Jansch		•	
	or completing schedules are on the back of	each schedule.		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
3 /24/14	Linda Doro	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	1103 Rallegh St.			
	Green Bay, Wi 54304		100.00	
1	· — — —			
· Male	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1				
	Check if In-Kind Loan Conduit	Conduit Name:		,
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
. , ,	·	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
:	·			
			1	
	,			
	Check if: In-Kind Loan Conduit	Conduit Name:		·
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1		Or Employment (if year-to-date total exceeds \$100)		rear-to-Date Fotal
		· -		
-				
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
· ·]	s of Harrie, Indining Address and Esp Code	Of Employment (if year-to-date total exceeds \$100)	Minodili	Year-to-Date Total
/ /				
		·		
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 1		Of Employment (if year-to-date total exceeds \$100)	1	Year-to-Date Total
1			1	
			İ	
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1			1	·
		-		
1	Check if: In-Kind Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
, , [Of Employment (if year-to-date total exceeds \$100)	İ	Year-to-Date Total
i				
	-1			
	Check if: In-Kind Lean Conduit	Conduit Name:		, ,
	CHIPT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	s 100.00	
	1006	OTAL TENNIZED OUNTRIBUTIONS THIS PAGE		
		TOTAL ITEMIZED CONTRIBUTIONS	\$	
	TOTAL	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$	
		•	\$100.00	
	IUIAL CUI	NTRIBUTIONS RECEIVED FROM INDIVIDUALS	1	

SCHEDULE 1-B

RECEIPTS Contributions from Committees (Transfers-In)

Page 1 of 1

Complete Committee Name	
Friends of Julie Jansch	
	· · · · ·

Instructions for completing schedules are on the back of each schedule.

The state of the s			
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
3/28/14	Wisconsin Laborers District Council, 4633 Liuna	100.00	Year-To-Date Total
3/20/ 14		100.00	
	Way, Suite 101 DeForest, Wi 53532		
		1	1 1
<u>, , , , , , , , , , , , , , , , , , , </u>	Check if: In-Kind Loan	Amount	Calendar
Date	Full Name of Committee, Mailing Address and Zip Code	4	Year-To-Date Total
4,7,14	AFSCME-INTERNATIONAL, 1625 L. ST. N.W.	200.00	1
			j
	Washington, DC 20036		
	Check if: In-Kind Loan	1]
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
Dute	, and the state of	į	Year-To-Date Total
I = I	"		1
		Ī]
•	Check if: In-Kind Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
	•		Year-To-Date Total
, ,		1	1
	,		
			i
	Check if: In-Kind Loan	Amount	Calendar
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Year-To-Date Total
1 1			1 100, 10 0000
, ,	1		<u> </u>
	<i>'</i> /	ĺ	·
	Check if: In-Kind Loan	1	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
Dette	1 Dil Marino di Comminiconi maningo indicasso and and anno and	,	Year-To-Date Total
1 1			i l
			,
		· .	
	Check if: In-Kind Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
		· .	Year-To-Date Total
1 1	1		1
			1
d.			1 1
	Check if: In-Kind Loan Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
Date	Full Name of Committee, Maining Address and Zip Code	runçanı	Year-To-Date Total
$\vec{I} = \vec{I}$	· ·	<u></u>	1 1
	J	1	
	Check if: In-Kind Loan		[
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
			Year-To-Date Total
$_{ij} = I - I$	·]
		94	·
			1
	Check if: In-Kind Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
	· ·		real-10-Date 10tal
1 1			
			`
	St Life 1/2-4 1 cm		
	Check if: In-Kind Loan		<u> </u>
* * * * * * * * * * * * * * * * * * * *		000 00	
	MITHEMATOR AND INVESTIGATION OF THE STATE OF	\$300.00	
	SUBTOTAL CONTRIBUTIONS (Transfers-In) THIS PAGE	3000.00	
*			
		\$300.00	
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$200.00	
the second second			1



DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Committee Name Friends of Julie Jansch

ם ום פפוופון ו	PILES DESCRIPTION		
Instructions fo	r completing schedules are on the back of each schedule.	•	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
3 / 26/14	Of Person or Business to Whom Payment is Made	Postcard Printing	213.11
\$, 2 9 1 3	Brown County Graphics, P.O. Box	i aarasia i mimiA	210.11
	12497 Green Bav. Wi 54307	1	ļ
	Check if: In-Kind Offset		ł
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made	I_ ' _ '	· ·
3 /21/14	Brown County Crembine D.O. Boy	Door Cards	263.75
	Brown County Graphics, P.O. Box	·	1 .
	12497. Green Bav. WI. 54307		
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
3 / 28/14	Of Person or Business to Whom Payment is Made	Bulk Mailing	295.45
	United States Postal Service, P.O>) Dank manning	1
	Box 8291. Green Bav. 54304	1	
	Check if: In-Kind Offset	' 	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
2 20.44	Of Person or Business to Whom Payment is Made		1
3 / 20/14	Dollar Tree, 811 S. Military, Green Bay,	Office Supplies	9.50
		1	
	WI 54 <u>304</u>		
Fi-k-	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
3 /21 / 14	•	Office Supplies	6.33
	Dollar Tree, 811 S. Military, Green Bay,		
4 4	WI 54 <u>304</u>		
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
3 /31 / 14	Of Person or Business to Whom Payment is Made	Printer Ink	33.55
0 /01/ 11	Cartridge World, Green Bay, WI 54304		00.00
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
4 /10/14	Of Person or Business to Whom Payment is Made	Vard Sign	295 00
4 /10/14	Julie Jansch, 2574 Oakwood Drive,	Yard Sign	285.00
1		re-imbursement	1
ŀ		·	
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date .	Of Person or Business to Whom Payment is Made	Specific Purpose of Experialiture	Amount
1 7		•	
			1
	Check if: In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
1 1	or or or or or or or or or or or or or o		
1	·		
	Check if: In-Kind Offset		
			4 400 00
	SURTATAL ITE	MIZED EXPENDITURES THIS PAGE	_s 1,106.69
	SOBIOTALTIC	MIZED EXPENDITORES THIS PAGE	3
			·
		TOTAL ITEMIZED EXPENDITURES	\$
		·	
	TOTAL HAITEM	IZED EXPENDITURES \$20 OR LESS	\$
•	(A) Let Old (Place	man and another year of the con-	
			¸1,106.69
		TOTAL EXPENDITURES	[

SCHEDULE 2-B

DISBURSEMENTS
Contributions To Committees
(Transfers-Out)

	1		1
Page		of	

Complete Comm	ittee Name of Julie Jansch		,	
	completing schedules are on the back of each schedule.			•
Date	Full Name, Mailing Address and Zip Code	Amount	Calendar	· · · · · · · · · · · · · · · · · · ·
5/21/14	Assembly Democrats P.O Box 814,	50.00	Year-To-Date Total	, .
	Madison, WI 53701	e		-
Date	Check if In-Kind Loan Full Name, Mailing Address and Zip Code	Amount	Calendar	
1 1			Year-To-Date Total	
Data	Check if In-Kind Loan Full Name, Mailing Address and Zip Code	Amount	Calendar	
Date I f	Full value, Walling Audress and 219 Code	·	/ Year-To-Date Total	•
, ,			,	
	Check if In-Kind Loan			# ·
Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	
1 1				
	Check if In-Kind Loan			
Date	Full Name, Mailing Address and Zip Code	Amount.	Calendar Year-To-Date Total	
1 1				
				·
Date	Check if In-Kind Loan Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	•
1 1			real-10-Date (Otal	
	·			:
Date	Check if In-Kind Loan Full Name, Mailing Address and Zip Code	Amount	Calendar	· \
1 1 -			Year-To-Date Total	
Date	Check if In-Kind Loan Full Name, Mailing Address and Zip Code	Amount	Calendar	
1 1	T diff realities, manifest realities with 22 p to 300		Year-To-Date Total	
	Check if In-Kind Loan		Colorador	
Date	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	
<i>f f</i>		N		
	Check if In-Kind Loan			· · · · · · · · · · · · · · · · · · ·
Date .	Full Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	
į į				÷
į	Chéck if Iñ-Kiño Loâń			
		50.00		
	SUBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$30.00	***End of [Janari*
		\$50.00 \$50.00	***End of I	zehoi r
TO	AL CONTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	\$		

Campaign Finance Report Short Form EB-2a State Elections Board		
Spring Fall Special Pre-Primary Spring Fall Special Pre-Election	Continuing Continuing	Report due Jan. 31,
Name of Candidate or Committee (in full)	endra L.	Juno n St.
Address (number and street) City, State, Zip	een Bay,	w1 54301
I certify that the above named committee or candidate make disbursements, or incur obligations during the phalance remains the same as previously reported. Til 11.06(9), Stats.	eriod covered by the	is report and that the cash
Signature of Committee Treasurer or Candidate	1	Daytime Phone 920-448-4021
EB-2a (Rev. 9/95) (Reformatted 3/98) (Y2K 9/99)		

SHORT FORM – Use For "No Activity" Reporting Period



	GN FINANCE REPO IMITTEES OF WISO	1	12345			
Is This Report an Amendment:	□/No		4 76			
Instructions for completing schedules are on the b		25.26.27.28.38.39.39.39.30.30.30.30.30.30.30.30.30.30.30.30.30.	AUG 2014			
COMMITTEE IDENTIFICATION						
Name of Committee FRIENDS OF CAR	OI.	122	Select dime			
Street Address	OL CIT	/c ² Ol	FFICE USE QN			
City, State and Zip Code	STUIEW.		LEOZALOL P			
Try, State and Zip Code	8526					
Please check if address is different than previously reported,	and complete the Campaign	Registration Statement in	the back of this form. 🔲			
NAME OF REPORT						
January Continuing Pre-Primary	Spring Fal	II Special				
July Continuing 3014 Pre-Election	Spring Fa	ll Special	Termination Report also complete Schedule 4			
TA vary command vary						
SUMMARY OF RECEIPTS AND	Column A	Column B				
DISBURSEMENTS	This Period	Calendar Year-To-Date				
1. RECEIPTS	0.66		1			
1A. Contributions (Including Loans) from Individuals	\$ <u>200</u>	\$ 200_	-			
1B. Contributions from Committees (Transfers-In)	\$	\$	<u> </u> -			
1C. Other Income and Commercial Loans	\$	\$				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$	\$				
2. DISBURSEMENTS						
2A. Gross Expenditures	\$	\$				
2B. Contributions to Committees (Transfers-Out)	\$	\$				
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$ 200				
CASH SUMMARY		·				
Cash Balance Beginning of Report	\$ 6572.85					
Total Receipts	\$					
Subtotal	\$	·				
Total Disbursements	\$ 200.00					
CASH BALANCE END OF REPORT	\$ 6372.85					
INCURRED OBLIGATIONS			•			
(Balance at the Close of This Period-3A)	\$					
LOANS (Balance at the Close of This Period-3B)	\$	l 				
I certify that I have examined this report and to the best of	f my knowledge and belief ature of Candidate or Treasurer	it is true, correct and cor	триеге.			
	~ ·	\$.	1.1.91			
Cant Kolor	Carol Ke	Daytime Pi	hone: Auly 31			

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

GAB-2L (Rev. 12/09) This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk.

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page	 of	

Complete Com	mittee Name			
Instructions for	or completing schedules are on the back of	each schedule.		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
G113114	Friends of John Vanderla 1422 Beech Tree Dr Green Bay WI 54304	Ben. Frank Laper	2000	2000
	Ocas Boy W 54304	Ben. Frank Labor	0.00	
	Check if: I in-Kind I Loan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$190)		Calendar Year-to-Date Total
1 1 .		or Employment (ii year-to-date total exceeds visoy)		1041 14 0410 1014
		! !		
Data	Check if: In-Kind Loan Conduit	Conduit Name: Cocupation, Name and Address of Principal Place	Amount	Calendar
Date / /	Full Mame, Maning Address and Zip Code	Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
			to the second terror	and the second section of the section of t
	Check if: In-Kind Loan Conduit	Conduit Name:		
Date / /	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	_		1	·
		·		
	Check if: Gin-Kind GLoan Conduit	Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
	Check if: In-Kind Loan Conduit	Conduit Name:	/ .	
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1, 1	, **	Of Employment (if year-to-date total exceeds \$100)		rear-to-Bate rotal
	Check if: Din-Kind DLoan Conduit	Conduit Name:	A CONTRACTOR	Malandar
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1. 1				
		Canduit blomes		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar Variation Table
1 1		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
 -				
				•
	Check if: In-Kind Loan Conduit	Conduit Name:		
	SUBTO	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ Q∞	
		TOTAL ITEMIZED CONTRIBUTIONS	\$ 200	
End	of Report*	UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ ·	
			s	
The second secon	AL CON	TRIBUTIONS RECEIVED FROM INDIVIDUALS	; *	

			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	TO ENVED
Campaign Finance Report Short Form EB-2a State Elections Board	:		18910	Sough Change
Spring Fall Special Pre-Primary	 	g Report due Jan. 31, g Report due July 20,	1.1	Pland Comp. Co.
Name of Candidate or Committee (in full) 2091 Magy Land Address (number and street) Suamico WI 54813 City, State, Zip				
certify that the above named committee or candidate on the period of the period of the period of the same as previously reported. This 1.06(9), Stats.	eriod covered by	this report and that th	e cash	
Signature of Committee Treasurer of Capetidate	Date 7/16/14	Daytime Phone	<u> 3.35</u>	3
B-2a (Rev. 995) (Reformatted 3/98) (Y2K 9/99)				

SHORT FORM – Use For "No Activity" Reporting Period

1	GN FINANCE REPO IMITTEES OF WISO	1	/s	PARCE USE ONE 1			
Is This Report an Amendment:	⊠ No		120	SIVED BY			
Instructions for completing schedules are on the b	ack of each schedule.		516	RECEIONA &			
COMMITTEE IDENTIFICATION							
Name of Committee			65	Sundra County Clerk			
Friends of Chuck Mahlik Street Address	•	·	OF.	free ust one to			
3103 S Clay S+ City, State and Zip Code				607931			
Green Bay, WI 54301							
Please check if address is different than previously reported,	and complete the Campaign	Registration Sta	tement in t	ne back of this form. 🔲			
NAME OF REPORT							
January Continuing Pre-Primary	Spring Fal	II 🔲 Spec	ial	.			
☑ July Continuing 2014 ☐ Pre-Election	Spring Fa	ll Spec	ial	Termination Report also complete Schedule 4			
SUMMARY OF RECEIPTS AND	Column A	Column	1 B				
DISBURSEMENTS	This Period	Calend					
1. RECEIPTS		Year-To-	Date	•			
1A. Contributions (Including Loans) from Individuals	\$ 2,370.00	\$ 2,370.	00				
1B. Contributions from Committees (Transfers-In)	\$ 250,00	\$ 250,0	,O	·			
1C. Other Income and Commercial Loans	\$ 0.00	\$ 0.00	5				
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$ 2,620.00	\$ 2,620.0	·O				
2. DISBURSEMENTS		··		V.			
2A. Gross Expenditures	\$ 472.25	\$ 472.2	5				
2B. Contributions to Committees (Transfers-Out)	\$ 000	\$ 0.00	0				
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 472.25	\$ 477.2	S				
CASH SUMMARY	, Te						
Cash Balance Beginning of Report	\$ 0.00						
Total Receipts	\$ 2,620.00						
Subtotal	\$ 2,628.00						
Total Disbursements	\$ 472.25	· .		• •			
CASH BALANCE END OF REPORT	\$ 2,147.75						
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 0.00						
LOANS (Balance at the Close of This Period-3B)	\$ 2,000.00			•			
I certify that I have examined this report and to the best o	f my knowledge and belief	it is true, corre	ct and com	plete.			
Type or Print Name of Candidate or Treasurer Sign.	ature of Candidate or Treasurer	<u>, , , , , , , , , , , , , , , , , , , </u>	Date: 7/	19/14			
Charles T. Mahlik	Vish 7 Mila-	•	Daytime Pho	one: (925) 448-4076			

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk. GAB-2L (Rev. 12/09)

Pg 1 of 6

Daytime Phone: (925) 448-4076

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of ____

Complete Committee Name

111211111111111111111111111111111111111	or completing screames are on me back or	each schedule.		
Date	for completing schedules are on the back of Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
5 126 114	John Walch	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Tota
5 120 111	2762 old Coach Rd			50,00
			50,00	· · · · · · · · · · · · · · · · · · ·
	Green Bay, WI 54302			
	Check if: Cin-Kind Ci Loan Conduit	Conduit Name: Ac+ Bive		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Tota
611 114	Chad Feld	Of Employment (ii year-to-date total exceeds \$100)	,	real-10-Date 10ta
i	1545 Morrow S+			50.00
	Green Bay, W1 54302		50.60	
	<u> </u>	0.1.01	30.00	
Date	Check if: C In-Kind C Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: AC+ Blue Coccupation, Name and Address of Principal Place	Amount	Calendar
	Full Name, Mailing Address and Zip Code	Of Employment (if year-to-date total exceeds \$100)	Andri	Year-to-Date Tota
5 /30 /14	Kathleen Feld			100,00
•	5483 Maple Heights	Homemaker	100,00	100,00
	Sturgeon Bay, W1 54235			
	Check if: In-Kind Loan Conduit	Conduit Name:		•
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar .
/24 /14 [*]		Of Employment (if year-to-date total exceeds \$100)	٠.	Year-to-Date Tota
124 /14	Virginia Johnson			50.00
	3456 Morning Star Green Bay, wi 54302		50.00	
• •	Green Bay, w1 54302			
	Check if: In-Kind Loan Conduit	Conduit Name:		-
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
130114		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Tota
	Kerry Blaney		100.00	100.00
	3595 Valley Brooke Ln Howard, WI 54313	Retired	,00.00	
	Howard, WI S4313			•
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:		·
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
, /30 /14		I continue to the second of th		
	Patrick J Costello			20.00
	450 N LOCUST ST		20.60	
	Green Bay, wi 54303			
	Check if: ☐ In-Kind ☐ Loan☐ Conduit	Conduit Name:	44	Calendar
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Year-to-Date Total
114 \1A	Charles Mahlik	Deputy Treasurer		500.00
٧.	3103 S clay St	Brown County	500.60	500.00
	Green Bay, wi 5430)	305 E Walnur St		
	Check if: Din-Kind Stoan Conduit	Green Bay, WI 54301 Conduit Name:		•
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
/14/14		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
	Charles Mahlik	Deputy Treasurer	- Cas - S	1,000.00
	3103 S Clay St	Brown County	500.00	
	Green Bay, WI 5430)	JOS E Walnut St Green Bay, w 54301		
	Check if: ☐ In-Kind Loan☐ Conduit	Conduit Name:		
· ·			\$1,370,00	
	SUBT	TOTAL ITEMIZED CONTRIBUTIONS THIS PAGE		
		TOTAL ITEMIZED CONTRIBUTIONS	\$2,370.00	
	TAT 1:	L UNITEMIZED CONTRIBUTIONS \$20 OR LESS	\$ 0.00	

RECEIPTS Contributions (Including Loans) From Individuals

Complete Committee Name
Friends of Chuck Mahlik

Instructions for	r completing schedules are on the back of ea	ch schedule.	· · · · · · · · · · · · · · · · · · ·	
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
6-116-114	Charles Mahlik	Deputy Treasure		2,000.00
	3103 S Clay St	Brown (oun M)	1,000.00	
	Green Bay, WI 54301	305 E Walnut SP		÷
	Check if: [] In-Kind Loan Conduit	Green Bay, WI 5430) Conduit Name:		
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place		Calendar Year-to-Date Total
	,	Of Employment (if year-to-date total exceeds \$100)	1	tear-in-page intai
, ,				
	· •		.	
	•			
	OLIVE FOLIANT FOLIANT	Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 /			ļ	-
,	•			
·	· ·			
,		Conduit Name:		
Date	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar.
	a met anderstant terceiverible a towns depos muses made manage	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
<i>;</i> /				
. •		•	1	
	D D. D	Conduit Name:		
0.40	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Occupation Name and Address of Principal Place	Amount	Calendar
Date	Full Maine, washing Address and the Code	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 1	·			•
·				
			Í	
·	Check if: In-Kind Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
Date	Full Name, Mailing Address and Elp Code	Of Employment (if year-to-date total exceeds \$100)	**	Year-to-Date Total
1 1	·			
		÷		
	Check if: Cin-Kind Clean Conduit	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
Date	Full Name, Mailing Address and Zip Code	Of Employment (if year-to-date total exceeds \$100)	-	Year-to-Date Total
I. I				
1			,	
ļ				
	,	On dell'Alaman		
	Check if: Cin-Kind Ci Loan Conduit Full Name, Mailing Address and Zip Code	Conduit Name: Occupation, Name and Address of Principal Place	Amount	Calendar
Date	Lail Mattic' Manish Variages and with code	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1 7	· '			}
1				
		0.13%		
	Check if: In-Kind Loan Conduit	Conduit Name:	1	1
•	SUBT	OTAL ITEMIZED CONTRIBUTIONS THIS PAGE	\$ 1,000.00	
		TOTAL ITEMIZED CONTRIBUTIONS	\$2,376,00	

Pg. 3 of 6

TOTAL UNITEMIZED CONTRIBUTIONS \$20 OR LESS | \$

TOTAL CONTRIBUTIONS RECEIVED FROM INDIVIDUALS \$2,370.00

RECEIPTS Contributions from Committees (Transfers-In)

Page 3 of 5

Complete Comm	ittee N	ame			 	
Friends	oF	Chuck	Mahlik			

Instructions for completing schedules are on the back of each schedule.

Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
6 1231 14	Brown County Democratic Party	,	rear-10-Date. Total
	118 S Chestnut AV	250.00	250.00
_	Green Bay, WIS4303 Check it Id lanking Id I can		
Date	Check if: C In-Kind C Loan Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar -
I = I	, ~		Year-To-Date Total
. , ,	· ·		
Date	Check If: In-Kind Loan Full Name of Committee, Mailing Address and Zlp Code	A	Calendar
	Pull Native of Continues, Making Address and Zip Code	Amount	Year-To-Date Total
1 1			
	·		
	Check if: In-Kind Loan		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
I = I = I			test-in-nare inisi
		. 1	
	Check if: 🖂 tn-Kind 🖂 Loen		
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
			Year-To-Date Total
1 1			
B.4.	Check if:		,
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
1 1			
•			
	Check if:	,	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar
1 1			Year-To-Date Total
		N.	
	Charles of the 1924 of Land		
Date	Check if:	Amount -	Calendar
, ,			Year-To-Date Total
, ,			
	Check if:	` \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
1 1			
]			•
	Check if: In-Kind Loan	•	•
Date	Full Name of Committee, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total
i, i			test-to-pare toral
	Check if:		
<u>l</u>	CHECKE: ILI IN-MRO ILI LORII	(
• ••			
	SUBTOTAL CONTRIBUTIONS (Transfers-in) THIS PAGE	\$ 250.00	
•			
		250,00	•
	TOTAL CONTRIBUTIONS (Transfers-In) RECEIVED FROM COMMITTEES	\$	

fg.40f 6

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Complete Committee Name

Friends of Chuck Mahlik

Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date	Of Person or Business to Whom Payment is Made	Observe Lasbase of Exhaustrate	
1/20/14	Division		133.37
-	Bluehost	Gampaign Website	
	560 Timpanogos Pkwy Orem, ut 34097	otaliaran wasast.	-10-11-10
	Check if: In-Kind Offset		Assessed
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
16 /14	Of Person of Busiliess to whom Payment is made		
	Vistaprint USA inc	A -	85,97
	95 Hayden Av	Campaign t-shirts	33,17
	Lexington, MA 02421 Checkif: 🔲 In-Kind Offset		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		
13/14	GotPmnt.com	C	
	7625 N San Fernando ad	Campaign business	110.79
·	Burbanki CA 91505	cards	
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made	absents t alkage of muhanguara	
/18 /14			1
	Office Max 2817 Soneida St	Thank you cards	27.19
	Green Bay, WI 54304	and postage	2 - 1 , 1
	Check if: In-Kind Offset	·	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
12/14	Of Person or Business to Whom Payment is Made		1.
, , , , ,	Vistaprinit USA Inc		96.22
	95 Hayden Av	Magnetic signs for	70.22
-	Lexington, MA 02421 Check if [] In-Kind Offset	<i>vehicles</i>	
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made	•	•
1 1	11 - 12 - 20 - 20 - 20 - 20 - 20 - 20 -	Action San San	3,96
i	Unitemized Expenditures	Online donation	3,16
	01-14 - 17 1-14-104-1	processing	
Date	Check if: [c] in-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
Date	Of Person or Business to Whom Payment is Made		,
/24/14	Deluxe		
. 1	3680 Victoria Street North	Checks	14.75
ľ	Shoreview, MN 55126.		
	Check if: In-Kind Offset	Paratta Dumage of Evenanditura	Amount
- Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Allouit
1 1	On a Grand of Grand o		
	•		
. 1	•	•	
	Check if:		
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
1 . 1	Of Person or Business to Whom Payment is Made		
1 1	·		
ŀ			·
ŀ	Check if:		
		_	•

SUBTOTAL ITEMIZED EXPENDITURES THIS PAGE 468.29 TOTAL ITEMIZED EXPENDITURES 3.96 TOTAL UNITEMIZED EXPENDITURES \$20 OR LESS 472.25 TOTAL EXPENDITURES \$

SCHEDULE 3-B

ADDITIONAL DISCLOSURE

Page <u>5</u> of <u>5</u>

Individual, Committee or Commercial

Complete Committee	Name		 	
Friends of	Chuck	Mahlik	•	

Instructions f	for completing schedules are	on the back of each schedule.		•		
	Full Name, Mailing Address an		Outstanding		Cumulative	Outstanding
	Charles Mahlik		Balance Beginning of This Period	New Loans This	Payments This Period	Balance End of This Period
Date	3103 S Clay 5	Of this Feriod	Period	THIS PERIOD	Elid of This Fellod	
4 / 14/14	Green Bay, W.		0,	200.00	•	500,00
List All Endors	ers or Guarantors (if any)	-	*.	•		
Full Name, Ma	illing Address and Zip Code	Occupation				
of Guarantor						
,		Name and Address of Employer	<u>.</u>			
		Amount Guaranteed Outstanding				
		\$				
Full Name, Ma of Guarantor	iling Address and Zip Code	Occupation		,		
,	•	Name and Address of Employer		·····		
	• • • •	Amount Guaranteed Outstanding			and the comment of th	
		\$				
	Full Name, Mailing Address and	Zip Code of Loan Source	Outstanding Balance Beginning	New Loans This	Cumulative Payments	Outstanding Balance
Date	Charles Mahlik		of This Period	Period	This Period	End of This Period
5/14/-14	5103 S Clay St Gren Bay, wi S	V301		500.∞	Ø	500.00
List All Endorse	ers or Guarantors (if any)		<u></u>			
	Y 171		·	*****		
of Guarantor	ling Address and Zip Code	Occupation	•		in in the second	
		Name and Address of Employer	<u> </u>			
	•	Amount Guaranteed Outstanding				
		\$	· · · · · · · · · · · · · · · · · · ·	•		
of Guarantor	ling Address and Zip Code	Occupation				
		Name and Address of Employer				
		Amount Guaranteed Outstanding				
		\$. ,		
	Full Name, Mailing Address and Charles Mahili		Outstanding Balance Beginning	New Loans This	Cumulative Payments	Outstanding Balance
Date	3103 S Clay St		of This Period	Period	This Period	End of This Period
6/16/14	Green Bay, WI	といると	0	1,000.00	Ð	1,000,00
·	rs or Guarantors (if any)	,		1. 2		
				No.		
Full Name, Maili of Guarantor	ng Address and Zip Code	Occupation				
•		Name and Address of Employer				
* .		Amount Guaranteed Outstanding				
	•	\$		•		
Full Name, Mailir of Guarantor	ng Address and Zip Code	Occupation				
	•	Name and Address of Employer				
•				<u> </u>	State of the state	
	•	Amount Guaranteed Outstanding				
	······································	l &	· · · · · · · · · · · · · · · · · · ·	•		

End of Report

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 2,000,00

TOTAL OUTSTANDING LOANS \$ 2,000.00

lg-6 of 6

	GN FINANCE REPO IMITTEES OF WISO	ORT CONSIN	9.45	1617 18 19 20 27 23 24 25 3 30 ENVERTINA 20 20 14 20	,
Is This Report an Amendment: Yes	⊠ No		1891011/28 1894 1894 1894 1894 1894 1894 1894 189		
Instructions for completing schedules are on the b	•			CENTED B	
COMMITTEE IDENTIFICATION	· · · · · · · · · · · · · · · · · · ·		5	10 2014 X	·
Name of Committee Elect Donna Mason for Clere Street Address	Kof Circuit C	burts	18 / S	Sandra L jung Sandra L jung Fice USE Offer L 1608 65	-
2591 Greenwald Street			- SAS	i-1606	
Green Bay, WI 54301			•		
Please check if address is different than previously reported,	and complete the Campaign	Registration Sta	tement in tl	he back of this form.	<u>ו</u>
NAME OF REPORT					
☐ January Continuing ☐ Pre-Primary <u>7-1-</u> 14	☐ Spring ☐ Fal	l Spec	ial .	□ Tii D	
July Continuing 4 30 14 Pre-Election	☐ Spring ☐ Fa	II Speci	al	Termination Reparts of Complete Schedule	
SUMMARY OF RECEIPTS AND	G.1	C-1	ъ	,	-
DISBURSEMENTS	Column A This Period	Column Calend		•	
1. RECEIPTS		Year-To-	Date	•	
1A. Contributions (Including Loans) from Individuals	\$ 3,145 00	\$ 3 142	5.00 5.		
1B. Contributions from Committees (Transfers-In)	s O	\$	0	. <u>.</u>	
1C. Other Income and Commercial Loans	\$ 0	\$	0		•
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	\$3,14500	\$ 314	5°°		
2. DISBURSEMENTS					
2A. Gross Expenditures	\$ 2,358.89	\$ 2.358	. 89		
2B. Contributions to Committees (Transfers-Out)	\$ O	\$	0		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 2,358,89	\$ 2,35	8.89		
CASH SUMMARY	· `				
Cash Balance Beginning of Report	s <i>O</i>				
Total Receipts	\$ 3,145.00		·		
Subtotal	\$ 3,145.00				
Total Disbursements	\$ 2,358.89				
CASH BALANCE END OF REPORT	s 786.11		•		•
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	s O			·	•
LOANS (Balance at the Close of This Period-3B)	\$ 0	· 			
I certify that I have examined this report and to the best of	f mv knowledge and belief	it is true, corre	ct and com	plete.	

NOTE: The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

This form is prescribed by the Government Accountability Board. Completed forms must be filed with your local clerk. q - 10fGAB-2L (Rev. 12/09)

Elect Donna Mason for Clerk of Coorts schedule 1-A Contributions Including Loans from Individuals

								. •		à"								D I	
														•				TING	3
04/29/14 Hickey	04/15/14	04/29/14 Jaekels		UD/16/14 Martin	05/08/14 Ritchay	05/08/14	04/15/14 Hoida		05/16/14 Dahlin		Others It Gagilai	04/15/14	U3/28/14 SICKE	27.00		Ub/19/14 Wieting	03/24/14 Mason	DATE	
Hickey	04/15/14 Petitjean	Jaekels		Martin	Ritchay	05/08/14 Thomson	Hoida		Danlin	:	Gagrari	04/15/14 Olejniczak	OICKE			Wieting	Mason	LAST	
Peter	John	Jeff		lem	Sue	Mike	Jim & Barb	· · · · · · · · · · · · · · · · · · ·	Bernard		Kobeli	Thomas	Alex	<u> </u>		Kurt	Donna	FIRST	
8606 Rileys Bay Road	125 S. Jefferson	337 Braebourne Court		320 Arbor Lane	3452 Emma Lane	2671 Continental Drive	Road	1701	Shepherd Lane	2670 Good	7 to Pine Street	Court	Court	346 Heidelberg		125 S. Jefferson	Street	ADDRESS	
Brussels	Green Bay	Green Bay		Green Bay	De Pere	Green Bay	De Pere		Green Bay		Green Bay	De Pere	Green Bay			Green Bay	Green Bay	CITY TI	
<u>≨</u>	≥			≦		≦	≦		≦		1		≦			V	WI	ST	
54204	54301	54301		54301	54115	54311	54115		54313		54301	54115	54302			54301	54301	ZIΡ	-64
Attorney	Attorney	Attorney		Homemaker	Operation	Insurance Agent	Retired	g	President		Attorney	Attorney	Attorney			Attorney		OCCUPATION	
		Wanezek & Jaekels, SC			Chase		_		Nichols Paper			,	Wieting, SC	Sickel, Petitjean &	Hinkfuss,		Brown County	EMPLOYER NAME	
		Bay, WI 54301	417 S. Adams Street, Green			·	Pere, WI 54115	1721 Lost Dauphin Road, De	54152	Street, Nichols, WI			54301	Street, Green Bay, WI	125 S. Jefferson			EMPLOYER ADDRESS	
\$ 100.00		\$ 200.00		\$ 100,00	\$ 50.00	\$ 100.00	\$ 200.00		\$500.00		\$ 50.00	\$ 100.00	\$ 200.00			\$50.00	\$ 5.00	AMOUNT	
\$100.00	\$50.00	\$200.00		\$100.00	\$50.00	\$100.00	\$200.00	·	\$500.00		\$50.00	\$100.00	\$200.00			\$50.00	\$5.00	.	(A) (A) (A) (A) (A) (A) (A) (A) (A) (A)

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Elect Donna Mason for Clerk of Courts

page 2 of 3

																						:
05/28/14	05/08/14 Kane	04/29/14	04/15/14	05/08/14	04/29/14	05/28/14 Geisler	04/29/14 Gerbers	04/15/14	04/29/14 Heide	05/08/14 Monfils	04/29/14	04/15/14 Matyas	04/15/14 Daul	04/15/14 Schober	05/08/14 Pedretti	04/29/14 Graefe	05/08/14	04/29/14 Duffy	05/08/14 Duffy	05/08/14 Vopal	y	
U5/28/14 Larscheid	Kane	04/29/14 Larscheid	04/15/14 Wanezek	05/08/14 Krawczyk	04/29/14 Galloway	Geisler	Gerbers	04/15/14 Thompson	Heide	Monfils	04/29/14 Anderson	Matyas	Daui	Schober	Pedretti	Graefe	05/08/14 Calewarts	Duffy	Duffy	Vopal		
Bill & Lisa	Larry	Richard	Warren	Judy	Thomas	Jean	Terry	Jay	John	Owen	Sue	David	David	Thomas	Tim & Jessie	Syl & Jim	Kenneth	Dennis	Timohty	Cynthia		
609 Floral Drive	3933 W. Ontonagon Lane	4045 Half Crown Run	2365 Donarski Court	Road Road	416 S. Monroe Avenue	3580 Landings Drive	480 Pilgrim Way	3319 Hyacintu Court	2152 Ridgecrest Trail	127 S. Washington St.	1003 Liberty Street	366 Main Avenue	417 S. Adams	2657 Nicolet Drive	402 Custer Court	1044 S. Monroe Avenue	3319 Camelia Court	1614 Willard Terrace	PO Box 1251	Court	4095 Three Penny	
Green Bay	Green Bay	De Pere	Green Bay	Green Bay	Green Bay	Excelsior	Green Bay	Green Bay	Green Bay	Green Bay	Green Bay	De Pere	Green Bay	Green Bay	Green Bay	Green Bay	Green Bay	De Pere	Green Bay	De Pere		\
×	≦	≨	§	≦	×.	Z N	≨	₩.	×	×	≦	≨	≨	M.	<u> </u>	WI	V:	<u>×</u>	W	≦		
54301	54301	54115	54302	54311	54301	55331	54304	54301	54313	54301	54304 Paral	54115	54301	54311	54301	5401	54301	54115	54305	54115		
Owner	54301 Retired	Operations Director	54302 Attorney	54311 Retired	54301 Attorney	55331 Homemaker	Attorney	54301 Attorney	54313 Attorney	54301 Attorney	Paralegal		Attorney	Attorney	Attorney	Retired	Attorney	Attorney	Attorney	Attorney		
Neville, Inc.		Broadway Automotive	Wanezek & Jaekels, SC			į														State of WI		
			417 S. Adams Street, Green Bay, WI 54301							·										54301	Street, Green Bay, WI	300 ≡ Wahu+
	\$ 25.00	\$ 100.00	\$ 200.00	\$50.00	\$ 50.00	\$ 100.00	60	1			\$ 25,00	\$ 50.00		- 1	_		\$ 100,00	\$ 50.00		\$ 150.00		
\$25.00	\$25.00	\$100.00	\$200.00	\$50.00	\$50.00	\$100.00	\$100.00	\$15.00	\$50.00	\$25.00	\$25.00	\$50.00	\$25.00	\$25.00	\$100.00	\$50,00	\$100.00	\$50.00	\$50.00	\$150.00	·	

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Elect Donna Mason for Clerk of Courts

page 3 of 3

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DISBURSEMENTS Gross Expenditures

Complete Committee Name Elect Donna Mason for Clerk of Cincuit Courts

Instructions for	completing schedules are on the back of each schedule.		
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4 1514	U.S. Postmaster		49.00
		Postage	44.
	Check if: In-Kind Offset	0	
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4 115114	Kuehn Printing	Photocopy Expense	2000
	401 N. QUINCYSTELT Green Bay, UL 54301	Nomination Papers	20.00
Date	Check if: In-Kind Offset	<u> </u>	
	Full Name, Mailing Address and 스p Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount
4 117 114	Donna Mason	Expuse Rumbure	l
	2591 Greenwald Street	-Envelopes, labels,	162.86
Date	Check if: In-Kind Offset Buy , WI 5430/ Full Name, Mailing Address and Zip Gode	Postage, Mail Merge Specific Purpose of Expenditure	Amount
	Of Person or Business to Whom Payment is Made		Amount
5 120 114	37. HUNGONS JAN-	Committee Mtg-	42.99
	2345. Washington Street Check it Junking Offset WL 54301	J	10.11
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
5 127/14	Of Person or Business to Whom Payment is Made	opeone / arpose of Experience	Amban
3 211 14	US Postmaster	Postage	9.80
	_	100,09	7. 00
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
6110114	Of Person or Business to Whom Payment is Made St. Bundan's Jinn		
Ψ.70.71	3345.Washington Street	Committee My	4756
	Green Bay, WI 54301	\mathcal{U}^{-1}	177.00
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
61/21/4	Of Person or Business to Whom Payment is Made	Election Report	
' ' '	Brown Cty Clex K & Office		175.00
	Green Bay, WL 54301	Fut the	, , , , ,
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of Expenditure	Amount
611114	Of Person or Business to Whom Payment is Made East Town Printers	Floating	
	725 Victoria Street	Election cards-	116.05
	725 Victoria Struct Check it: In-Kind Offset Check it: In-Kind Offset		
Date	Office II. I I I I I I I I I I I I I I I I I	Specific Purpose of Expenditure	Amount
61314	Badoriand Printing. Inc.	Printing	
	1010 GRMAD. CHUIT	Election Buttons	197.29
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		TOTAL ITEMIZED EXPENDITURES	\$ ~ ~ ~ ~ ~ .
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	TOTAL UNITEM	IZED EXPENDITURES \$20 OR LESS	\$ <u>U</u>
		TOTAL EXPENDITURES	

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DISBURSEMENTS Gross Expenditures

Page $\frac{2}{3}$ of $\frac{2}{3}$

Complete Committee Name Elect Donna Mason for Clerk of Cincuit Courts

Instructions for	completing schedu	les are on the back of each sche	dule.	_		
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	914 Burd	ANING	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	nd Signs	4	\$1,275.75
		Manah, WI 5495	14	0031911	3	
Date	Check it: In-Ki	ind Onset			42 34	
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			1 103	tage		1,00
	Check if: In-Kir	nd Offset	.	The state of the s		
Date	Full Name, Mailing A	ddress and Zip Code	Speci	fic Purpose of Expen	iture	Amount
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Date		ddress and Zip Code	< 3/100	1WICS		
Date	Of Person or Busines	ss to Whom Payment is Made	Specii	ic Purpose of Expen	iture	Amount
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71114	Of Person or Busines	s to Whom Payment is Made				
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	2292 IN W	instruct a	On	MODIS		AX 89
	Check if: In-Kin	d Offset Tren Day ill	15/3/ V	16/1/21		
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711 114	Heritor	e. Hil State Da	$(k \mid VD)$	110 120	no-A	**
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1 1	OFFERSON OF DUSINES:	to whom Fayment is Made				
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1 1	Of Person or Business	to Whom Payment is Made				
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<u>L</u>	Check if: In-Kind	Offset		· · · · · · · · · · · · · · · · · · ·		
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	•	SUBTO	TAL ITEMIZED EXP	ENDITURES THIS	PAGE	\$ 1,538.34 2 250 80
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Er	a ot Re	port***		TOTAL EXPENDIT	URES	\$41201

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Campaign Finance Report Short Form EB-2a State Elections Board Spring Fall Special Continuing Report due Jan. 31, · Pre-Primary Spring Fall Special Pre-Election Continuing Report due July 20, Zo/ Name of Candidate or Committee (in full) MOYNIHAN COMMITTEE FOR BETTER
GOVERNMEN 2444 BABCOCK ROAD Address (number and street) CREEN BAY, WI 54313 City, State, Zip I certify that the above named committee or candidate did not receive contributions or other income, make disbursements, or incur obligations during the period covered by this report and that the cash

balance remains the same as previously reported. This report fulfills filing requirements under Sec.

ignature of Committee Treasurer or Candidate

Daytime Phone

SHORT FORM - Use For "No **Activity**" Reporting Period

